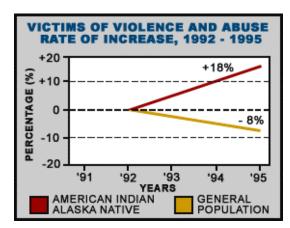
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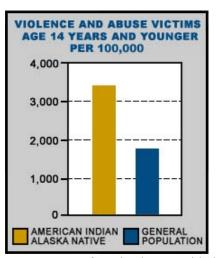
American Indian and Alaska Native children are the victims of violence and abuse at rates twice that for all U.S. children.

BACKGROUND

Many objective indicators show an alarming disparity in the health status and general well being of Indian children and youth. Overcrowding, limited employment opportunities, and other psychosocial and economic factors are associated with disparate rates of family violence. According to a Department of Health and Human Services Report in 1992, 19% of all homicide victims and one-third of female victims in American Indian and Alaska Native communities were killed by family members. In response to the Domestic Violence and Child Abuse and Family Violence Prevention Act (P.L. 101-630) passed in 1990, efforts were intensified to meet the intent of the Act. Several programs for addressing child abuse, child neglect, and family violence were authorized in the Act, but



no funds for implementation were appropriated. However, the Indian Health Service (IHS) continued to initiate strategies to address the problems of family violence.



SITUATION

In most Indian communities, the IHS participates in multi-agency Child Protective Teams. These teams are designed to ensure communications, cooperation, and follow-through with neglect/abuse environments. Additionally, the IHS has been funding four tribal child sexual abuse treatment projects in collaboration with the Bureau of Indian Affairs (BIA). The IHS has also provided grants to a number of tribal and urban Indian child welfare programs for child abuse prevention programs. The agency supports child abuse/neglect training and consultation for IHS, tribal, BIA, and urban Indian health programs. Training has been provided for American Indian child treatment providers through a national IHS postgraduate fellowship program. In 1996 the IHS established a memorandum of agreement with the BIA to assist tribes in conducting employee background investigations as required by P.L. 101-630. In one community, the

Department of Justice has provided resources to IHS to employ a forensic psychologist to aid in the child protective process.

There are approximately 65 trained staff and mental health and social service workers with some experience in child treatment in the IHS. In 1990, the Office of Technology Assessment recommended a staffing level of 200 Mental Health/Social Service professionals trained in child treatment to meet the needs of Indian country.

OPTIONS/PLANS

There is a continuing need for training of health providers, educators, parents, tribal courts, and law enforcement staff. The IHS staff will continue their work with BIA, tribal, county, and urban Indian health program staff to enhance intervention capacities to address domestic violence and violence against children issues. The IHS will continue to pursue partnerships with the Family Violence Prevention Fund, the Department of Justice Violence Against Women Act program, National Center on Child Abuse and Neglect, the BIA, and other agencies and organizations to establish prevention and treatment programs and provide training.

ADDITIONAL INFORMATION

For referral to the appropriate spokesperson, contact the IHS Public Affairs Staff at 301-443-3593.